

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)
(Please print or type)

RECEIVED
OFFICE USE ONLY

2013 JAN 16 PM 1:09

OFFICE OF THE CITY CLERK
CITY OF MIAMI, FL

I, RALPH ROSADO

candidate for the office of CITY OF MIAMI, COMMISSIONER DISTRICT 4

have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X

Ralph Rosado

Signature of Candidate

1/16/12

Date

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).

APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES
(Section 106.021(1), F.S.)
(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the qualifying officer before opening the campaign account.

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1. CHECK APPROPRIATE BOX(ES):

Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Office Party

2. Name of Candidate (in this order: First, Middle, Last)
RALPH ROSADO

3. Address (include post office box or street, city, state, zip code)

1800 CORAL WAY
PO BOX 452521
MIAMI, FL 33245

4. Telephone (305) 588-4364 5. E-mail address ralph@ralphrosado.com

6. Office sought (include district, circuit, group number)
CITY OF MIAMI, COMMISSIONER DISTRICT 4

7. If a candidate for a nonpartisan office, check if applicable:

My intent is to run as a Write-In candidate.

8. If a candidate for a partisan office, check block and fill in name of party as applicable: My intent is to run as a
 Write-In No Party Affiliation _____ Party candidate.

9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

RALPH ROSADO

11. Mailing Address

PO BOX 452521

12. Telephone

(305) 588-4364

13. City MIAMI	14. County MIAMI-DADE	15. State FL	16. Zip Code 33245	17. E-mail address RALPH@RALPHROSADO.COM
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18. I have designated the following bank as my Primary Depository Secondary Depository

19. Name of Bank

CHASE BANK

20. Address

2209 SW 37 AVENUE

21. City MIAMI	22. County MIAMI-DADE	23. State FL	24. Zip Code 33145
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UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date

1/16/12

26. Signature of Candidate

X

Ralph Rosado

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

I, RALPH ROSADO, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

1/16/12

X

Ralph Rosado

Date

Signature of Campaign Treasurer or Deputy Treasurer

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**
(Section 106.021(1), F.S.)

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code)

1800 CORAL WAY

PO BOX 452521

MIAMI, FL 33245

4. Telephone

(305) 588-4364

5. E-mail address

ralph@ralphrosado.com

6. Office sought (include district, circuit, group number)

CITY OF MIAMI, COMMISSIONER DISTRICT 4

**7. If a candidate for a nonpartisan office, check if
applicable:**

My intent is to run as a Write-In candidate.

8. If a candidate for a partisan office, check block and fill in name of party as applicable: My intent is to run as a

Write-In No Party Affiliation _____ Party candidate.

9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

JEANNINE R. MIRANDA

11. Mailing Address

95 MERRICK WAY, SUITE 250

12. Telephone

(305) 445-0777

13. City

CORAL GABLES

14. County

MIAMI-DADE

15. State

FL

16. Zip Code

33134

17. E-mail address

jen@riescoandcompany.com

18. I have designated the following bank as my

Primary Depository

Secondary Depository

19. Name of Bank

CHASE BANK

20. Address

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21. City

MIAMI

22. County

MIAMI-DADE

23. State

FL

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25. Date

1/16/13

26. Signature of Candidate

Ralph Rosado

27.

Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

I, JEANNINE R. MIRANDA, do hereby accept the appointment
(Please Print or Type Name)

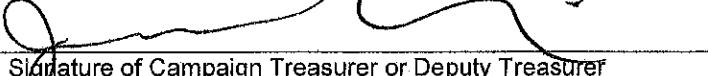
designated above as:

Campaign Treasurer

Deputy Treasurer.

1/16/13

Date


Signature of Campaign Treasurer or Deputy Treasurer

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MIAMI, FL 33245

4. Telephone 5. E-mail address

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9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

JOSE A. RIESCO, CPA

11. Mailing Address

95 MERRICK WAY, SUITE 250

12. Telephone

(305) 445-0777

13. City
CORAL GABLES

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MIAMI-DADE

15. State
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25. Date

1/16/12

26. Signature of Candidate

X

Ralph Rosado

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

I,
(Please Print or Type Name)

, do hereby accept the appointment

designated above as:

Campaign Treasurer

Deputy Treasurer.

1/16/12

X

Signature of Campaign Treasurer or Deputy Treasurer